24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Vote!	
	C C00473918
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Precision Network, LLC	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1140 Connecticut Ave NW	Amount
Ste 800	Amount
City State Zip Code	93219.52
Washington DC 20036-4010	Transaction ID: VN7A7A5AR54 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Digital Category/ Type 004	10
Name of Federal Candidate Support Office	e Sought: House District: 00
Trump, Donald, J., ,	President Senate State: 00
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Precision Network, LLC	10 17 2016
Mailing Address 1140 Connecticut Ave NW	
Ste 800	Amount
City State Zip Code	673224.81
Washington DC 20036-4010	Transaction ID: VN7A7A5AR62 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Digital Category/ Type 004	M M / D D / Y Y Y
Type Type	10 06 2016
Name of Federal Candidate Support Office	e Sought: House District: 00
Trump, Donald, J., ,	President Senate State:00
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	766444.33
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 1 7 1 1 7 1 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Fines, Caroline, , , [Electronically Filed] Date Signature	0 17 2016
Olynature	